FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073 Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization) FORM Iowans For Van Fossen DR-2 DISCLOSURE REPORT (Rev. 12/2009) IMPORTANT: Indicate by # type of committee you are reporting for. (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other Political School Board or Other Political Subdivision PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other Political Sch For Office Use Only Comm. # 11 ) Local Ballot Issue Logged In CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Scanned Candidate Name Republican Computer Jamie Van Fossen Audited District (if Senate or House) Office Sought State Representative Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. DATE SIGNED SIGNATURE OF PERSON FILING REPORT REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. I AM FILING A 01/19/09 Indicate by # 1 (report date) ☑CHECK IF AMENDMENT TO REPORT DATED 01/19/09 Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 3669 88 of the last reporting period or must be zero if this is first report filed.) ..... ADD TOTAL MONEY TAKEN IN THIS PERIOD 6025.00 Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... Schedule F: Loans Received total (Attach Schedule F) ..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 9694.88 SUB-TOTAL .....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 9418.86 Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... Schedule F: Loan Repayments total (Attach Schedule F)..... 276.02 CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$ \*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... 5344.06 \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ ✓ NO YES CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form  CONTRIBUTIONS MONEY TAKEN IN	Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
(Including candidate's personal funds)		✓ CHE	CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)		AME	NDING FORM
Iowans for Van Fossen			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAMÉ AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
01/12/09	ID# CK#	James Van Fossen 2802 Middle Rd. Davenport, IA	self	\$200.00	
	ID# CK#				
	ID#				
	CK#				
	CK#				
	CK#				-
	CK#				<u> </u>
	ID# CK#				
			SUB-TOTAL	\$ 200.00	
TOTAL (if last page of this sch			t page of this schedule)	\$ 200.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE В (Rev. 07/03)

MONETARY **EXPENDITURES** 

CHECK THIS BOX IF AMENDING FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Iowans for V	THE RESIDENCE OF THE PARTY OF T	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT EXPENDED
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
01/05/09	ID# CK#1060	Qwest Communications Des Moines,IA	internet service/ fax line	\$ 252.00
01/09/09	ID# CK# 1062	US Cellular Chicago, IL	Cell phones	338.61
01/09/09	ID# CK#	US Cellular Chicago, IL	Cell phones	305.34
01/16/09	ID# CK# <sub>1064</sub>	Dawn Van Fossen Spouse	Reimbursement:	112.34
	ID# CK#			
	ID# CK#			
	ID#			
	ID# CK#			
			SUB-TO TOTAL (if last page of this sched	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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	TIONS, SEE BACK OF FORM			SCHEDULE E (Rev. 06/97) C	IN-KIND ONTRIBUTIONS
	NAME (Must be same as on Statement of Org	anization)			
Iowans for Van Fossen  Reset Form			CHECK THIS BOX IF AMENDING FORM		
DATE RECEIVED	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
MM/DD/YR) 06/08/08	OP Printing 2610 Park Ave Muscatine, IA	(n applicate)	Campaign Mailer	\$ 3054.27	
06/10/08	OP Printing 2610 Park Ave Muscatine, IA		Fundraiser invites	1277.23	
07/11/08	OP Printing 2610 Park Ave Muscatine, IA		Brochure	1012.56	
			SUB-TOTAL	5344.06	
			TOTAL (if las page of this schedule	s 5344.06	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of\_1 Page (for Schedule E)